

## PURCHASING AUTHORITY PURCHASE ORDER

STD. 65 (REV. 7/2003)

**COMPLETED**

CONTRACT REGISTRATION NUMBER	AGENCY ORDER NUMBER PRF14-1779	AMENDMENT NO
SUPPLIER: The numbers identified above MUST be shown on Invoice & Packing Slip.	DATE 05/11/2015	PAGE OF PAGE 1   3

See Shipping Instructions

**B** DLE/BFS/CA Cyber Crime Center (C4)  
**I** 4949 Broadway, Room F-104  
**L** Sacramento, CA 95820  
**L** Attn: Veronica (Roni) Riley

AGENCY BILLING CODE

43735

PURCHASING AUTHORITY NUMBER

9G-0116-DOJ-HQ1

LEVERAGED PROCUREMENT AGREEMENT NO.

TO: Silicon Forensics  
 SUPPLIER ADDRESS: 1242 E. Lexington Ave.  
 Pomona, CA 91766

(Type or  
 Print  
 Legibly)

INFORMATION TECHNOLOGY PROJECT IDENTIFICATION NUMBER

AGENCY OR BUYER  
INFORMATIONAGENCY TRACKING/REQUISITION NUMBER (Optional)  
14-735-0081AGENCY NAME  
DOJCONTACT NAME  
Veronica (Roni) Riley

CONTACT E-MAIL ADDRESS

Veronica.Riley@doj.ca.gov

CONTACT PHONE NUMBER  
(916) 227-0420

CONTACT FAX NUMBER

SUPPLIER CONTACT NAME Jack Su		SUPPLIER PHONE NUMBER (909) 632-1797		SUPPLIER FAX NUMBER		SUPPLIER E-MAIL ADDRESS sales@siliconforensics.com	
PAYMENT TERMS Net 45		CERTIFICATION NUMBER 1752330		<input type="checkbox"/> Certified Small Business <input checked="" type="checkbox"/> Certified Microbusiness		EXPIRATION DATE 04/30/2016	
REQUIRED DELIVERY DATE		SHIPPING INSTRUCTIONS		<input type="checkbox"/> F.O.B. Destination FRT. PPD <input checked="" type="checkbox"/> F.O.B. Destination FRT. PPD/ADD Freight not to exceed cost stated on P.O.		<input type="checkbox"/> F.O.B. ORIGIN CITY OF ORIGIN STATE ZIP CODE	

ITEM NUMBER	QUANTITY	UNIT	COMMODITY CODE or PRODUCT CODE or SERVICES ID NUMBER	RECYCLED PRODUCT	PRODUCT OR SERVICES DESCRIPTION	UNIT PRICE	EXTENSION TOTAL
1	3	ea	FHW		STE300F2 RF Shielded Test Enclosure Forensics window	1,695.00	5,085.00
					and gloves		0.00
							0.00
					See attached Shipping Instructions		0.00
					Quote#17200		0.00
							0.00
							0.00
							0.00
							0.00
							0.00
							0.00
							0.00

A-1 <input checked="" type="checkbox"/> General Provisions are incorporated herein by reference to: <input checked="" type="checkbox"/> Form GSPD - 401Non-IT Commodities (revision date 6/8/10) OR <input type="checkbox"/> Form GSPD - 401IT (revision date .085) <input type="checkbox"/> ATTACHED OR <input checked="" type="checkbox"/> Published at website: <a href="http://www.dgs.ca.gov/pd">www.dgs.ca.gov/pd</a>		TAXABLE SUBTOTAL		5,085.00
TERMS AND CONDITIONS A-2 <input type="checkbox"/> This order is issued under a Department of General Services (DGS) Leveraged Procurement Agreement (LPA). Terms and Conditions set forth in that agreement (LPA number referenced in the block titled Leveraged Procurement Agreement No.) are incorporated herein by reference as if set forth in full text. B <input type="checkbox"/> Agency Special Provisions are attached and titled _____ C <input checked="" type="checkbox"/> Any other attachments, such as specifications, Statement of Work, or Information Technology Model Language Modules, are identified in the product or services description area or on continuation pages.		TAX RATE 8.500% SALES TAX 432.23		432.23
PROCUREMENT METHOD <input checked="" type="checkbox"/> COMPETITIVE: Solicitation Number (if applicable) _____ <input type="checkbox"/> LEVERAGED <input type="checkbox"/> DVBE / SMALL BUSINESS [GC 14838.5(a)] <input type="checkbox"/> NON-COMPETITIVELY BID <input type="checkbox"/> EXEMPT		* NOTE: If there are variable charges for Installation, Shipping or Freight, or Other Non-Taxable Services, detail per line item and enter total here.		150.00
PROGRAM / CATEGORY (Code and Title) 99 General		FUND TITLE General		5,667.23
ITEM 0820-001-0001		CHAPTER 25 STATUTE 2014 FISCAL YEAR 14/15 OBJECT OF EXPENDITURE (CODE AND TITLE) 735/2265		<input type="checkbox"/> O.E. <input type="checkbox"/> EQ.

## CERTIFICATION AND APPROVAL OF EXECUTIVE OFFICER

I HEREBY CERTIFY, on personal knowledge, that this order for purchasing the items identified above is issued in accordance with the procedure prescribed by law governing the purchase of such items for the State of California; and that all such legal requirements have been fully complied with.


AUTHORIZING NAME (Print or Type)

Linda Fenner

TITLE

SSM I

AUTHORIZING SIGNATURE



UNENCUMBERED REMAINDER AFTER  
 POSTING THIS ORDER TO ALLOTMENT  
 EXPENDITURE LEDGER

ADJUSTMENT  
 INCREASING ENCUMBRANCES

ADJUSTMENT  
 DECREASING ENCUMBRANCES

CERTIFIED CORRECT (SIGNATURE)



# Silicon Forensics

1242 E LEXINGTON AVE  
POMONA, CA 91766  
Tel: 909-632-1797, Fax: 714-6804988  
www.siliconforensics.com

Quote #	Date
17200	4/14/2015

<b>Name / Address</b>
DLE/CA Cyber Crime Center ( C4 ) 4949 Broadway, Room J-242 Sacramento, CA 95820 Attn: Chris Chambers

<b>Ship To</b>
DLE/CA Cyber Crime Center ( C4 ) 4949 Broadway, Room F-104 Sacramento, CA 95820

Customer Contact Customer E-mail P.O. No. Customer Phone Terms Rep					14-735-0081 Net 45 JS				
Item					Description				
FWH					STE300F2 RF SHIELDED TEST ENCLOSURE FORENSICS				
Shipping					Shipping				
Qty					Unit Price				
3					1,695.00				
1					150.00				
Total					5,085.00T				
Total					150.00				
Subtotal					\$5,235.00				
Sales Tax (8.5%)					\$432.23				
Total					\$5,667.23				

Please contact your sales rep or one of our team members at sales@siliconforensics.com to confirm order. Refer to Quote number at the top right.  
This quote is good for 45 days from the date on the top right.  
Thank you for the opportunity!

Quote